



## HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

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LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST				
NAME (Last)	(First)	(Middle)	TELEPHONE	
Munson	Beverly		546-4450	
MAILING ADDRESS (Street)			FAX	
1177 Bishop Street			546-8500	
(City)	(State)		(Zip Code)	
Honolulu	Hawaii		96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE	
Hawaiian Telcom, Inc.			546-4450	
MAILING ADDRESS (Street)			FAX	
1177 Bishop Street			546-8500	
(City)	(State)		(Zip Code)	
Honolulu	Hawaii		96813	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU	TELEPHONE		
Hawaiian Telcom Commu	546-4450		
MAILING ADDRESS (Street)	FAX 546-8500		
1177 Bishop Street			
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE	
JoAnn Yosemori		546-3868	
MAILING ADDRESS (Street)		FAX	
1177 Bishop Street		546-8500	
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY						
☐ Agriculture		Education	Human Services	Science, Technology & Economic Development		
Communic Public Utilit		Government Operation & Finance	<ul><li>Intergovernmental Relations, International Affairs</li></ul>	☐ Tourism & Recreation		
Consumer Commerce	Protection &	Hawaiian Affairs	✓ Labor & Employment	☐ Transportation		
Culture, Art Preservation		Health	<ul><li>Planning, Land &amp; Water</li><li>Use Management</li></ul>	Other: (indicate below)		
Ecology, Environme	nergy ntal Protection	Housing	Public Safety & Corrections			
	CERTIFICATION O					
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.						
25 Mars 1/3/07						
(Signature of Lobbyist)		(Date)				
				·		
PART V A	AUTHORIZATION 1	TO LOBBY				
NAME		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED				
Michael S.	Ruley	Chief Executive Officer				
NAME OF OR	GANIZATION (if applica	able)		TELEPHONE		
Hawaiian 1	Telcom, Inc.			546-3868		
MAILING ADD	RESS (Street)			FAX		
1177 Bisho	op Street			546-8500		
(City)		(State)	(	Zip Code)		
Honolulu		Hawaii	(	96813		
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.						
I hereby	y authorize the abov	ve - named person to er	ngage in lobbying activities on b	ehalf of the undersigned.		
l hereby	y authorize the above	ve - named person to er	ngage in lobbying activities on b	ehalf of the undersigned.		